

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

RECEIVED
SECRETARY OF THE SENATE
PUBLIC RECORDS

12 FEB -3 AM 10:30

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

GRANITE OATH PAC

ADDRESS (number and street)

43 North Main Street



Check if different than previously reported. (ACC)

Concord

NH

03301

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C 00491472

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

4. TYPE OF REPORT
(Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



July 31 Mid-Year Report (Non-election Year Only) (MY)



Termination Report (TER)

(b) Monthly Report Due On:



Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)



Nov 20 (M11) (Non-Election Year Only)



Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)



Dec 20 (M12) (Non-Election Year Only)



Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

in the State of

(d) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

in the State of

5. Covering Period

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

through

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer James F. Merrill

Signature of Treasurer

Date

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only

FEC FORM 3X
Rev. 12/2004

COMMISSION
PUBLIC DISCLOSURE
DIVISION

2012 FEB -3 PM 4:22

FEDERAL
PUBLIC
COMMISSION

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

GRANITE OATH PAC

Report Covering the Period: From:

MM / DD / YYYY
07 / 01 / 2011

To:

MM / DD / YYYY
12 / 31 / 2011

**COLUMN A
This Period**

**COLUMN B
Calendar Year-to-Date**

6. (a) Cash on Hand
January 1,

YYYYYY
2 0 1 2

1 4 2 0 2 0 0

(b) Cash on Hand at
Beginning of Reporting Period.....

1 2 0 4 0 8 3

(c) Total Receipts (from Line 19)

6 8 6 7 7

(d) Subtotal (add Lines 6(b) and
6(c) for Column A and Lines
6(a) and 6(c) for Column B).....

1 2 7 2 7 6 0

7. Total Disbursements (from Line 31)

9 5 2 4 4 8

8. Cash on Hand at Close of
Reporting Period
(subtract Line 7 from Line 6(d))

2 5 1 6 3 5

9. Debts and Obligations Owed TO
the Committee (Itemize all on
Schedule C and/or Schedule D)

0 0 0

10. Debts and Obligations Owed BY
the Committee (Itemize all on
Schedule C and/or Schedule D)

0 0 0



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Report Covering the Period: From:

MM	DD	YY
07	01	2011

 To:

MM	DD	YY
12	31	2011

I. Receipts

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

- (a) Individuals/Persons Other Than Political Committees
(i) Itemized (use Schedule A).....

2 5 0 0 0

1 5 4 0 0 0 0

- (ii) Unitemized

4 3 6 7 7

5 6 7 3 7 7

- (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

6 8 6 7 7

2 1 0 7 3 7 7

- (b) Political Party Committees

0 0 0

0 0 0

- (c) Other Political Committees (such as PACs).....

0 0 0

0 0 0

- (d) Total Contributions (add Line 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)

6 8 6 7 7

2 6 0 7 3 7 7

12. Transfers From Affiliated/Other Party Committees.....

0 0 0

0 0 0

13. All Loans Received

0 0 0

0 0 0

14. Loan Repayments Received.....

0 0 0

0 0 0

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

0 0 0

0 0 0

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

0 0 0

0 0 0

17. Other Federal Receipts (Dividends, Interest, etc.).....

0 0 0

0 0 0

18. Transfers from Non-Federal and Levin Funds

- (a) Non-Federal Account (from Schedule H3)

0 0 0

0 0 0

- (b) Levin Funds (from Schedule H5)

0 0 0

0 0 0

- (c) Total Transfers (add 18(a) and 18(b))..

0 0 0

0 0 0

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

6 8 6 7 7

2 6 0 7 3 7 7

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

6 8 6 7 7

2 6 0 7 3 7 7

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements

COLUMN A **Total This Period**

COLUMN B **Calendar Year-to-Date**

21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0 0 0	0 0 0
(ii) Non-Federal Share	0 0 0	0 0 0
(b) Other Federal Operating Expenditures	6 8 3 9 4 8	1 6 6 2 5 6 5
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	6 8 3 9 4 8	1 6 6 2 5 6 5
22. Transfers to Affiliated/Other Party Committees	0 0 0	0 0 0
23. Contributions to Federal Candidates/Committees and Other Political Committees	0 0 0	0 0 0
24. Independent Expenditures (use Schedule E)	0 0 0	0 0 0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	0 0 0	0 0 0
26. Loan Repayments Made	0 0 0	0 0 0
27. Loans Made	0 0 0	0 0 0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0 0 0	0 0 0
(b) Political Party Committees	0 0 0	0 0 0
(c) Other Political Committees (such as PACs)	0 0 0	0 0 0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0 0 0	0 0 0
29. Other Disbursements	2 6 8 5 0 0	6 2 4 5 0 0
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0 0 0	0 0 0
(ii) "Levin" Share	0 0 0	0 0 0
(b) Federal Election Activity Paid Entirely With Federal Funds	0 0 0	0 0 0
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0 0 0	0 0 0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	9 5 2 4 4 8	2 2 8 7 0 6 5
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	9 5 2 4 4 8	2 2 8 7 0 6 5

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Ex- penditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	6 8 6 7 7	2 6 0 7 3 7 7
34. Total Contribution Refunds (from Line 28(d))	0 0 0	0 0 0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	6 8 6 7 7	2 6 0 7 3 7 7
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	6 8 3 9 4 8	1 6 6 2 5 6 5
37. Offsets to Operating Expenditures (from Line 15, page 3)	0 0 0	0 0 0
38. Net Operating Expenditures (subtract Line 37 from Line 36)	6 8 3 9 4 8	6 8 3 9 4 8

12030732044

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 14

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

GRANITE OATH PAC

A. Full Name (Last, First, Middle Initial) Butch Kierstead		Date of Receipt 08 / 13 / 2011	
Mailing Address 15 Ferry Road		Amount of Each Receipt this Period 25000	
City Nashua	State NH	Zip Code 03064	
FEC ID number of contributing federal political committee. C			
Name of Employer Hampshire First Bank		Occupation Director of Residential Lending	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
B. Full Name (Last, First, Middle Initial)		Date of Receipt	
Mailing Address			
City	State	Zip Code	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period	
Name of Employer		Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
C. Full Name (Last, First, Middle Initial)		Date of Receipt	
Mailing Address			
City	State	Zip Code	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period	
Name of Employer		Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional).....			
TOTAL This Period (last page this line number only).....			

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 14

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

GRANITE OATH PAC

Full Name (Last, First, Middle Initial)

A. Coalition of NH Taxpayers

Mailing Address **8 North Main Street**

City **Concord** State **NH** Zip Code **03301**

Purpose of Disbursement

Ticket Purchase

Candidate Name

0 1 2

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

0 7 / 0 9 / 2 0 1 1

Amount of Each Disbursement this Period

1 5 0 0

B. Town of Hanover

Mailing Address **PO Box 483**

City **Hanover** State **NH** Zip Code **03755**

Purpose of Disbursement

Parking Ticket

Candidate Name

0 0 1

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

0 7 / 2 0 / 2 0 1 1

Amount of Each Disbursement this Period

1 0 0 0

C. Spectrum Marketing

Mailing Address **95 Eddy Road**

City **Manchester** State **NH** Zip Code **03102**

Purpose of Disbursement

Marketing and Email

Candidate Name

0 0 3

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

0 8 / 1 2 / 2 0 1 1

Amount of Each Disbursement this Period

1 4 5 5 4

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1 7 0 5 4

12030732046

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 8 OF 14

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

GRANITE OATH PAC

Full Name (Last, First, Middle Initial)

A. Ovide M. Lamontagne

Mailing Address 172 Young Street

City Manchester

State NH

Zip Code 03103

Purpose of Disbursement

Event Expense & Refreshment Reimbursements

Candidate Name

007

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

08 / 25 / 2011

Amount of Each Disbursement this Period

510228

B. Outdoor Pride Landscaping

Mailing Address 500 Harvey Road

City Manchester

State NH

Zip Code 03103

Purpose of Disbursement

Event Expenses

Candidate Name

007

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

10 / 03 / 2011

Amount of Each Disbursement this Period

18601

C. Spectrum Marketing

Mailing Address 95 Eddy Road

City Manchester

State NH

Zip Code 03102

Purpose of Disbursement

Marketing and Email

Candidate Name

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

10 / 11 / 2011

Amount of Each Disbursement this Period

28983

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

557812

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 9 OF 14

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

GRANITE OATH PAC

Full Name (Last, First, Middle Initial)

A. Campaign Solutions

Mailing Address 117 North Saint Asaph Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement

Email Services

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

10 / 13 / 2011

Amount of Each Disbursement this Period

2500

B. Spectrum Marketing

Mailing Address 95 Eddy Road

City Manchester State NH Zip Code 03102

Purpose of Disbursement

Marketing and Email

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

10 / 13 / 2011

Amount of Each Disbursement this Period

38961

C. Clark Hill, PLLC

Mailing Address 1250 Eye Street, Suite 900 NW

City Washington State DC Zip Code 2005

Purpose of Disbursement

Legal/Compliance

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

10 / 14 / 2011

Amount of Each Disbursement this Period

40500

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

81961

12030732048

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 10 OF 14

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

GRANITE OATH PAC

Full Name (Last, First, Middle Initial)

A. Devine Millimet & Branch, PA

Mailing Address
111 Amherst Street

City
Manchester

State
NH

Zip Code
03101

Purpose of Disbursement

Event Expenses

Candidate Name

0 0 7
Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 03 / 2011

Amount of Each Disbursement this Period

2 1 2 0

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

2 1 2 0

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 OF 14

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (in Full)

GRANITE OATH PAC

Full Name (Last, First, Middle Initial)

A. Grafton County Republican Committee

Mailing Address **146 Grandview Road**

City **Sugar Hill**

State
NH

Zip Code
03585

Purpose of Disbursement

Contribution

Candidate Name

0 1 1

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

0 7 / **0 7** / **2 0 1 1**

Amount of Each Disbursement this Period

3 0 0 0 0

Full Name (Last, First, Middle Initial)

B. House Republican Victory PAC

Mailing Address **PO Box 1015**

City **Milford**

State
NH

Zip Code
03055

Purpose of Disbursement

Contribution

Candidate Name

0 1 1

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

0 7 / **0 7** / **2 0 1 1**

Amount of Each Disbursement this Period

3 0 0 0 0

Full Name (Last, First, Middle Initial)

C. Friends of Ray Burton

Mailing Address **338 River Road**

City **Bath**

State
NH

Zip Code
03740

Purpose of Disbursement

Contribution

Candidate Name

0 1 1

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

0 7 / **0 9** / **2 0 1 1**

Amount of Each Disbursement this Period

2 5 0 0

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

6 2 5 0 0

0 0 0 0 0

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 OF 14

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

GRANITE OATH PAC

Full Name (Last, First, Middle Initial)

A. NH Young Republicans

Mailing Address 10 Water Street

City Concord

State Zip Code
NH Young 03301

Purpose of Disbursement

Contribution

Candidate Name

0 1 1
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 12 / 2011

Amount of Each Disbursement this Period

5 0 0 0

B. Committee to Re-Elect Bill O'Brien

Mailing Address PO Box 1015

City Milford

State Zip Code
NH 03055

Purpose of Disbursement

Contribution

Candidate Name

0 1 1
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 20 / 2011

Amount of Each Disbursement this Period

6 0 0 0

C. New Hampshire Republican State Committee

Mailing Address 10 Water Street

City Concord

State Zip Code
NH

Purpose of Disbursement

Contribution

Candidate Name

0 1 1
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 21 / 2011

Amount of Each Disbursement this Period

5 0 0 0 0

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

6 1 0 0 0

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 13 OF 14

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (in Full)

GRANITE OATH PAC

Full Name (Last, First, Middle Initial)

A. New Hampshire Republican State Committee

Mailing Address
10 Water Street

City Concord State NH Zip Code 03301

Purpose of Disbursement

Contribution

Candidate Name

0 1 1

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

0 9 / 0 1 / 2 0 1 1

Amount of Each Disbursement this Period

5 0 0 0 0

B. DeBlois 20123

Mailing Address
824 South Mammoth Road

City Manchester State NH Zip Code

Purpose of Disbursement

Contribution

Candidate Name

0 1 1

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

1 0 / 0 3 / 2 0 1 1

Amount of Each Disbursement this Period

7 5 0 0

C. Lisa Gravel for Alderman

Mailing Address
30 Belmont Street

City Manchester State NH Zip Code 03103

Purpose of Disbursement

Contribution

Candidate Name

0 1 1

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

1 0 / 0 3 / 2 0 1 1

Amount of Each Disbursement this Period

1 0 0 0 0

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

6 7 5 0 0

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 14 OF 14

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

GRANITE OATH PAC

Full Name (Last, First, Middle Initial)

A. Dover Republican Committee

Mailing Address

City
Dover

State
NH

Zip Code
03820

Purpose of Disbursement

Contribution

Candidate Name

0 1 1

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

10 / 04 / 2011

Amount of Each Disbursement this Period

1 0 0 0 0

B. House Republican Victory PAC

Mailing Address
PO Box 1015

City
Milford

State
NH

Zip Code
03055

Purpose of Disbursement

Contribution

Candidate Name

0 1 1

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

10 / 05 / 2011

Amount of Each Disbursement this Period

6 0 0 0 0

C. Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

0 1 1

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

10 / 05 / 2011

Amount of Each Disbursement this Period


0 0 0 0 0

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

7 0 0 0 0
9 1 9 9 4 7

Federal Election Commission
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<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify): <i>Fed Ex</i> Shipping Date <i>1/31/12</i>	
Next Business Day Delivery <input checked="" type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input checked="" type="checkbox"/> Received from Senate Public Records Office	Date of Receipt <i>2/3/12</i>
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<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
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